

**Provider Inspection Summary**  
For the period 07/01/2003 to 06/30/2006  
Adult Family Home

**Facility Information**

**Facility Name:** LASALLE HOUSE (0009984)  
**Address:** 2608 FINGER RD, GREEN BAY, WI 54302  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 03/03/2003  
**Regional Office:** NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

**Survey History**

**Survey ID:** 0096272      **End Date:** 01/26/2006      **Type:** STANDARD      **Purpose:** SURVEY/SELF REPORT  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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